## FORM D

SECURITIES AND EXCHANGE COMADISTIONIVED Washington, D.C. 20549

OMB Number:

3235-0076

cpires:

May 31, 2002 imated average burden hours per response . . . 16.00

OMB APPROVAL

FORM D

2 5 2002

NOTICE OF SALE OF SECU PURSUANT TO REGULATION 155

SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY Prefix Serial DATE RECEIVED

Name of Offering (☐ check if Coffee2Go, Inc.	this is an amendment and name has changed, and is	ndicate change.) 1178880
Filing Under (Check box(es) that	apply): 🗌 Rule 504 🔼 Rule 505 🖸 Rule 506	Section 4(6) ULOE
Type of Filing: New Filing	☐ Amendment	
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested		
Name of Issuer ( check if this	s is an amendment and name has changed, and indi-	cate change.)
Coffee2Go, Inc.		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	· · · · · · · · · · · · · · · · · · ·
1971 Lunsden Rd. #22	22 Brandon, FL 33511	(813) 661-4503
Address of Principal Business Ope (if different from Executive Office	erations (Number and Street, City, State, Zip Code) s)	Telephone Number (Including Area Code)
Brief Description of Business Operator of European	style retail coffee bars.	02043996
Type of Business Organization KKcorporation	☐ limited partnership, already formed	☐ other (please specify):
☐ business trust	☐ limited partnership, to be formed	PROCESSED
Actual or Estimated Date of Inco	rporation or Organization:  Month Year  0 0 1	☑ Actual ☐ Estimated ☐ JUL 2 9 2002
	rganization: (Enter two-letter U.S. Postal Service al CN for Canada; FN for other foreign	

### GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

## State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

# A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - · Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and managing partner of partnership issuers.		
Check Box(es) that Apply: Executive Officer   Beneficial Owner   Executive Officer	Ď Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Ayres, Jay L.		
Business or Residence Address (Number and Street, City, State, Zip Code)		
1971 Lunsden Rd. #222 Brandon, FL 33511		
Check Box(es) that Apply: X Promoter    Beneficial Owner    X Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Acar, Metin		
Business or Residence Address (Number and Street, City, State, Zip Code)		
1971 Lunsden Rd. #222 Brandon, FL 33511		· · · · · · · · · · · · · · · · · · ·
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		
Lind, Johannes		·
Business or Residence Address (Number and Street, City, State, Zip Code)		
1971 Lunsden Rd. #222 Brandon, FL 33511		
Check Box(es) that Apply: Promoter  Beneficial Owner  Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Nail, David L.		
Business or Residence Address (Number and Street, City, State, Zip Code)		
1971 Lunsden Rd. #222 Brandon, FL 33511		
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Lindros, Johan		
Business or Residence Address (Number and Street, City, State, Zip Code)		
1971 Lunsden Rd. #222 Brandon, FL 33511		
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
(Use blank sheet, or copy and use additional copies of this sheet	et as necessary	

				<b>B.</b> I	NFORM	ATION A	BOUTO	FFERIN	G				
1. Has t	the issuer s	old, or do	es the issu	er intend	to sell, to	non-accre	lited inves	tors in this	offering?			Yes XX	No
			Ans	wer also i	n Append	ix, Colum	n 2, if fili	ng under U	LOE.				
2. What	is the min	imum inv	estment th	at will be	accepted f	rom any i	ndividual?					1.00	<u> </u>
3. Does	the offerin	ng permit j	joint owne	rship of a	single unit	1?			· · · · · · · · · · · ·			Yes	No .
	the inform												-
to be list tl	or similar re listed is ar ne name of aler, you r	associate the broke	ed person o r or dealer	or agent of . If more	a broker o than five (	or dealer r 5) persons	egistered v to be liste	vith the SE ed are asso	C and/or	with a stat	e or states,		
Full Name	(Last nam	e first, if	individual	)							<del></del>		
•.	`	ŕ		•					*				1
Business o	r Residenc	e Address	(Number	and Street	, City, Sta	te, Zip Co	ode)				,		
						_							
Name of A	ssociated 1	Broker or	Dealer		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>				<u>-</u> -				
					;								
States in V	Vhich Perso	on Listed	Has Solici	ted or Inte	ends to Sol	licit Purch	asers						
•													
(Check'	'All States"	or check											
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[ MT ] [ RI ]	[ NE ] [ SC ]	[ NV ] [ SD ]	[ NH ] [ TN ]	[TX]	[ NM ] [ UT ]	[ NY ] [ VT ]	[VA]	[ ND ] [ WA ]	[ OH ] [ WV ]	[ OK ] [ WI ]	[ OR ] [ WY ]	[ PA [ PR	_
Full Name						[ ]	[ 457]	[WA]	[ ,, , ]	[ ,,_]	[ // _ ]	1	<u> </u>
I dil Ivalic	(Last Hain	e msi, n	many fada	,									
Business o	r Residenc	a Address	Number	and Street	City Sta	te Zin Co	da)						
Dasiness o	i residenc	c Hadress	(Trumber	and onec	, 011,, 014	.c, 2.p 00	<b>u</b> c)						
Name of A		01	Deales										<del></del>
Name of A	issociated i	Broker or	Dealer		ν.								•
		·		·		·							
States in V	Vhich Perso	on Listed	Has Solici	ted or Inte	ends to Sol	licit Purch	asers					•	
(Check '	'All States'	or check	individual	States)	••••••							∃ All S	tates
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[ L ]	[ IN ]	[ IA ]	[KS]	[ KY ]	[LA]	[ ME ]	[ MD ]	[ MA ]	[ MI ]	[MN]	[ MS ]	[ MO	-
[ MT ]	[NE]	[ NV ]	[ NH ]	[NJ]	[NM]	[NY]	[ NC ]	[ ND ]	[ OH ]	[OK]	[ OR ]	[PA]	_
[ RI ] Full Name	[SC]	[SD]	[TN]	[TX]	[UT]	[ VT ]	[ VA ]	[ WA ]	[WV]	[ WI ]	[ WY ]	[PR]	<u> </u>
ruii Name	(Last nam	e mrst, m	maividuai	)									
<del>D </del>		<del>, , ,</del>	/N.T. 1	1.0	G'1 G1	- 7: C							
Business o	r Kesidenc	e Address	(Number	and Street	, City, Sta	te, Zip Co	de)						
<del>-</del>						<u> </u>							
Name of A	ssociated I	Broker or	Dealer										
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States in V	Vhich Perso	on Listed	Has Solici	ted or Inte	ends to Sol	icit Purch	asers						
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[ RI ]	[ SC ]	[ SD ]	[TN]	[ TX ]	[UT]	[ VT ]	[ VA ]	[ WA ]	[ WV ]	[ WI ]	[ WY ]	[ PR ]	<u> </u>

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

### 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold 0 ☐ Common ☐ Preferred 0 \_\_\_\_\_)....s\_\_ 0 0 Other (Specify\_ Total..... \$ 1,500,000 \$ Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors of Purchases Accredited Investors. 0 0 Total (for filings under Rule 504 only).... Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Dollar Amount Type of Type of offering Security Sold N/A 0 N/A N/A 0 Rule 504 N/A 0 Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Engineering Fees ..... 🖺 Other Expenses (identify) ...

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE O	OF PROCEEDS		elink stor
	b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		<u>s_1,45</u>	0,000
	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.			
		Payments to Officers, Directors, & Affiliates	Paymer Oth	
	Salaries and fees	0	□ s	0
	Purchase of real estate	<u>.0</u>	□ s	0
	Purchase, rental or leasing and installation of machinery and equipment	0	□ s	0
	Construction or leasing of plant buildings and facilities	. 0.	□ s	0
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	0	□ \$	0
	Repayment of indebtedness			0
	Working capital			
	Other (specify):			
	·			
		0	□ s	0
	Column Totals			
	Total Payments Listed (column totals added)		450.000	,
	•			
	D. FEDERAL SIGNATURE			<u> </u>
ol	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If th lowing signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exc est of its staff, the information furnished by the issuer to any non-accredited investor pursuant to	change Commis	sion, upon wri	tten re-
SS	uer (Print or Type) Signature	Date	_ 1, 1	
	Coffee2Go, Inc.		7/15/02	
Ĭa	me of Signer (Print or Type) Title of Signer (Print) or Type)			
	Jay L. Ayres President			
_				

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE
Is any party described in 17 CFR 230.262 presentl of such rule?	
See App	endix, Column 5, for state response.
<ol><li>The undersigned issuer hereby undertakes to fur. Form D (17 CFR 239.500) at such times as requ</li></ol>	nish to any state administrator of any state in which this notice is filed, a notice on ired by state law.
<ol><li>The undersigned issuer hereby undertakes to fur issuer to offerees.</li></ol>	nish to the state administrators, upon written request, information furnished by the
<ol> <li>The undersigned issuer represents that the issuer limited Offering Exemption (ULOE) of the state of this exemption has the burden of establishing to</li> </ol>	r is familiar with the conditions that must be satisfied to be entitled to the Uniform in which this notice is filed and understands that the issuer claiming the availability hat these conditions have been satisfied.
The issuer has read this notification and knows the coundersigned duly authorized person.	ontents to be true and has duly caused this notice to be signed on its behalf by the
Issuer (Print or Type)  Coffee2Go, Inc.	Signature Date 7 15 2
Name (Print or Type)	Title (Print or Type)

# Instruction:

Jay L. Ayres

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1		2	3	4 5						
	to non-a	to sell accredited is in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item l)	Type of investor and amount purchased in State (Part C-Item 2)					Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	A 0	Van	<b>N</b> T -	
AL	163	110		investors	Amount	Investors	Amount	Yes	No	
AK					· .					
AZ			<u>,</u>			· ·				
AR					<del> </del>		·		·	
CA	X		*	· 0	Q	0.	0		Х	
СО					-				-	
СТ										
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### APPENDIX

1		2	3	5						
	to non-a	to sell accredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item I)		Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item1)	
State	Yes	No		Number of Accredited Investors	Accredited Non-Accredited		Yes	No		
MT							11110411	1.05	110	
NE	,									
NV										
NH					:					
NJ				:						
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NY		·								
NC-										
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